CAMPAIGN TREASURER'S REPORT SUMMARY										
(1)	Kathryn Maxine Nelson	OFFICE USE ONLY								
	Name	ONLINE SUBMISSION								
(2)	PO Box 3493	Submitted on:								
	Address (number and street)	10/23/2014 11:25:40 (eastern)								
	Fort Pierce, FL 34948 City, State, Zip Code									
	_	(0) ID Noveley								
	Check here if address has changed	(3) ID Number: 238								
(4)	Check appropriate box(es):									
	 ☐ Candidate Office Sought: County Court Judge, Group 4 ☐ Political Committee (PC) ☐ Electioneering Communications Org. (ECO) ☐ Party Executive Committee (PTY) ☐ Check here if PTY has disbanded ☐ Independent Expenditure (IE) (also covers an individual making electioneering communications) ☐ Check here if no other IE or EC reports will be filed 									
	(5) Report	Identifiers								
Cove	er Period: From <u>10</u> / <u>11</u> / <u>2014</u> To	10 / 17 / 2014 Report Type: <u>G6</u>								
<u>X</u> 0	riginal Amendment Spe	ecial Election Report								
(6)	Contributions This Report	(7) Expenditures This Report								
Casl	n & Checks \$,	Monetary								
Loar		Transfers to Office Account \$, , , 0 . 00								
Tota	I Monetary \$, , , 5 00	Total Monetary \$, 245 . 00								
In-Ki	ind \$,,0.00	Total Monetary \$, , 245 . 00								
		(8) Other Distributions \$, , 000								
(9)	(9) TOTAL Monetary Contributions To Date \$, _116_, _33300									
(11) Certification It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.) I certify that I have examined this report and it is true, correct, and complete: (Type name) Individual (only for IE Deputy Treasurer										
X		X								
Si	gnature	Signature								

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Kathryn Maxine Nelson (2) I.D. Number 238								
	10/11/2014		1	0/17/2014		1	1	
(3) Cover Peri	od//	thro	ugh	<i>l l</i>	(4) Pag	le <u> </u>	of <u></u>	
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)		(8)	(9)	(10)	(11)	(12)	
Sequence Number	Street Address & City, State, Zip Code	550000	ntributor Occupation	Contribution Type	In-kind Description	Amendment	Amount	
10/16/2014	Cunzo Law Firm, 601 Citrus Avenue Fort Pierce, FL 34950		aw firm	СН			\$50.00	
1								
10/16/2014	Garland, PA, Thomas R. 1914 SE Port St. Lucie Blvd Port St. Lucie, FL 34952		law firm	СН			\$25.00	
2								
1 1								
1 1								
1 1								
1 1								

10/16/2014	Cunzo Law Firm, 601 Citrus Avenue Fort Pierce, FL 34950	В	law firm	СН			\$50.00		
1									
10/16/2014	Garland, PA, Thomas R. 1914 SE Port St. Lucie Blvd Port St. Lucie, FL 34952		law firm	СН			\$25.00		
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1 1									
1 1									
1 1									
DS-DE 13 (Rev. 11/13) SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES									

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name	Kathryn	Maxin	e Nel	son			 (2) I.D. Nun	nber	2	238	-
	1	10/11/	2014		10/17/	2014		-			
(3) Cover P	eriod	1	1	through	1	1	(4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
10/16/2014	2050 13th Avenue	postage	MO		\$245.00
1	Vero Beach, FL 32960			5	
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DS-DE 14 (Rev					